PTOYSEOS (08-03)
Approved for use through 7/31/2006, CNUS GES 1-0032
U.S. Putant and Transmirth Officer, U.S. DEPARTMENT OF CONNERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									or the state of th	10	T. \$25	Fill.
CLAIMS AS FILED - PART I OTHER THA												
⊢	(Column 1) (Column 2)					Caluman 2)	•	SWALL	ENIIIA	OR 1	SWALL	ENTITY
BAS	FOR MOUNT BASIC FEE			EN FILED	NUM	NUMBER EXTRA		RATE	ÆE		RATE	FEE
(7707R L.18(a))							1		<u></u>	OR		<u> </u>
(37 CFR 1.18(c))				coloue 2	o • ·			×	I	OR	x 3	
	(37 GFR 1.16(b))			mbus 3 •		. "	1	x 1		OR		
MILL TUPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(4))							1	+1		OR	+, .	
* if the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART 8 -1 -1												
	(Column 1) (Column 2) (Column 5)							SMALL	ENTITY	OR		R THAN ENTITY
4	15	i a	ADAS ADADAG		HUGHEST	PRESENT	1					
K	rcE	AF	TER DMENT		PREVIOUSLY PAID FOR			RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE
ENDMENT	Can case ration	1		Militars	20			x s •		OR	x \$	
2	propenders profit 1,1800	. 3	5	Minus	"5			x s=		OR	x s•	
¥	FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (27 CFR 1,104Q)						+5	_	OR	+s •		
,								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
12-12-0 (Column 1) (Column 2) (Column 3)								ADDITE:		,	ADDE PEE	
8	-10 03	a	UNIS		(Column 2) MIGHEST	(Cotumn 3)) 1		
ENT 6		AF.	uning Ter		NUMBER PREVIOUSLY	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	AMEN	DNENT	Minus	PAID FOR	1.			FEE			FEE
AMENDM	cor crist 1,180g transparated	- /	/ 	Wine	20	!		x \$•		OR	X 8	
ME	the cyal resident	Ь	9_1			1 /	П	x \$o		OR	X 8+	
FIRST FRESENTATION OF MULTIPLE DEPENDENT QUAIN (07 CFR 1.10(4))								+5 -		OR	+9 .	Zol
η.	13.3.							ADD'L FEE		OR	ADD'L FEE	200
<u>"(</u>	13-06	COM	m f)		(Column 2)	(Column 3)						
NTC		REMA AFT AMENT	ANDHO ER		HIGHEST NUMBER. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		ratė	ADDI- TIONAL FEE .
ENDMENT	tons risks	. 0)	Minus	-20	• —		x 9 •	\	ОЯ	x :	722.
	to car riths popularies	. 4		Minus	. 5	•		x 8		OR	×5	
₹	FIRST PRESENT	ATION OF	OF MULTIPLE DEPENDENT CLAIM (\$7 CFR 1.16(m)					+1		OR	+ 2 •	
									. \	OR I	TOTAL ADD'L FEE	-/-
•	E De "Highest t	lumber P	reviously!	Peld For	in cultumn 2, wil IN THIS SPACE IN THIS SPACE	is less than 20.	ente	ADOL FEE				
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"The Highest Number Previously Paid For" (If THIS SPACE is less than 3, order "7.

The Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This indication of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to precess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete hicketing gathering, preparing, and submitting the completed his formation from the USPTO. There will vary depending upon the individual cases. Any comments the the amount of time you require to complete this form another suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Department of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Petents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.